

West Virginia Medicaid Aged and Disabled Waiver  
Quality Improvement Advisory Council Meeting Minutes  
October 22, 2019

Attendees:

Mark Fordyce	Stephanie Thorn
Radene Hinkle	LuAnn Summers
Cecilia Brown	Sara Martin
Marcus Canady	David Maynard
Carissa Davis	Sherry Wooten
Susan Silverman	Erin Beck
Leah Browning	

- I. Welcome. Cecilia Brown welcomed Council members and members introduced themselves. Vice Chair, Mark Fordyce then called the meeting to order.
- II. Meeting Minutes. Minutes from the April 2019 meeting were reviewed and approved. Radene Hinkle made a motion to accept the minutes and the motion was seconded by Carissa Davis.
- III. Take Me Home (TMH) Update. Sara Martin first gave a brief overview of Transition Program numbers since January 2019:
  1. Referrals - 222
  2. Intakes - 168
  3. Qualifying Determinations - 166
  4. Approved Transition Plans - 24
  5. Transitions - 23 (includes 2 MFP's from last year)
  6. Pre-transition Closures - 73

There are currently 83 people in the pipeline.

Marcus Canady then presented a draft of a report regarding the Purpose and History of Money Follows the Person, the Take Me Home Transition Program, Sustainability Plan Initiatives, Rebalancing and Other Initiatives and testimonials from program recipients who have transitioned and remained out of institutions for at least 365 days. The Summary Report includes program descriptions, historical program information and a data section as well. Marcus plans to update the report on a quarterly basis.

Updates on a few Sustainability initiatives:

1. TeleHealth. The agreement with WVU has been signed and they are in the process of finalizing the details/processes for this initiative, which should be complete by January 2020. They are also working with two vendors,

Medtronics and greatcall, who offer phones/devices and other health and safety services. This initiative will target approximately 30 ADW/TBI participants with the goal of reducing ER visits, reducing hospital re-admissions, education on fall prevention strategies and providing improved monitoring of chronic conditions. Actual start date for the program is projected for March 2020. Cecilia Brown stated that she would like to add the results of this initiative into coordination of healthcare and fall prevention strategies into the Quality Councils scope of work.

2. No Wrong Door. The No Wrong Door initiative offers a system to assist individuals in making informed decisions and exercise control over their long-term care needs. After a few delays, the fiscal information is now being finalized. TMH will begin with a three-year plan created years ago for No Wrong Door, make revisions and prioritize some original components to come up with a new draft. WVU is partnering on this initiative as well.
3. Online Case Management. This Pilot Agreement, between BMS and WellSky, a healthcare software and services vendor, is projected to continue through at least March 2020. BoSS and BMS have asked for some enhancements to the online system which are expected to make data entry more user friendly. Data from quarterly user satisfaction surveys is being collected to grade the effectiveness/efficiency of statewide online Case Management system. Results will be presented to BMS.
4. Reauthorization. The MFP program was extended with additional funding (although not at the same level) through 2024. A proposal for an actual five-year re-authorization is still making its way through Congress. One significant change with the re-authorization would be lowering the qualifying minimum from 90 to 60 days in a long-term-care facility.

IV. Waiver Application and Policy Update. LuAnn Summers updated the Council on ADW issues:

1. Still holding weekly meetings to work on the new ADW Application and Policy Manual. Pertinent information/suggestions received from the ADW statewide forums have been added.
2. Some other topics that will be added to the new Application and Policy Manual include:
  - Electronic Visit Verification (EVV)
  - Conflict Free Case Management
  - Personal Emergency Response systems (PERS)
  - Assigning individual NPI numbers to Personal Attendants
  - Adding changes in Health and Welfare in the areas of provider monitoring, the Incident Management System (IMS) to include more extensive investigation of critical incidents, etc.

BMS is awaiting Technical Assistance from the Centers for Medicare and Medicaid (CMS) on many of the topics listed above before they can finalize the

new Application and Manual. CMS is visiting all 50 states and could possibly be in West Virginia in January 2020. BMS is also working towards making all Waivers as similar as possible, where they can.

- V. Personal Care Policy Update. The review and updates on the new Personal Care Policy Manual are almost complete. There have not been many changes, but rather adding clarifications to already existing policies. One change, however, will be adding a reason – “Not able to provide services safely” for closure of an unsafe case. This already exists in the ADW program and it will be added to Personal Care as well.
- VI. State Fiscal Year 2018-2019 Discovery and Remediation Data Discussion. Cecilia Brown gave an overview of the fiscal 2018-19 year-to-date ADW report. This report summarizes Performance Measure data that is reported to CMS. Data is collected during provider agency reviews and includes, staff training compliance, Service Planning competency, incident management and reporting, mortality reviews and healthcare coordination, to name a few. Performance was good overall; however, more education and training will be done on the Incident Management System (IMS) to help improve those numbers.
- VII. Quality Work Plan. The Council then reviewed the FY2020 Quality Work Plan.  
Goal 1. To increase health and welfare within the Service Planning process and incident prevention and planning. The overall objectives in this Goal include  
Objective 1.1, increase Service Planning capacity through:
  - a) Developing a Clinical Protocol for “After Action Review” for Service Planning meetings. Timeframe: June 30, 2020
  - b) Conducting “Team Teaching” training models at the Quarterly Provider meetings regarding Assessment Planning, Back-up Plans, and identified Risks on Service Plans;
  - c) Adding required follow-up when provider agency monitoring indicates a participant’s need for assistance with coordination of healthcare.Objective 1.2. Connecting incident process to Service Planning process by requiring a review of incidents at the time of a Service Plan meeting.  
Timeframe: January 2020  
Goal 2. To increase capacity and capability with the WV Incident Management System. Objective 2.1. Increase clinical information and compliance with the IMS:
  - a) Schedule a health and welfare leadership meeting. Include agency Directors to one, educate them on the system, and two, make it clear that they are responsible for ensuring their agency is compliant with incident reporting and follow-up;
  - b) Continue to provide training on the IMS. Timeframe: November 2019
  - c) Email all IMS users the IMS Talks and the 3-C’s of Mortality Review. Timeframe: January 2020

- d) ADD: Incident Management System enhancements. Talks are currently underway for certain enhancements to the system to simplify reporting/follow-up.

Goal 3. To increase Waiver staff ability to identify, prevent and adequately address unsafe environments.

- a) Provide training on the Assessment and triage of unsafe environments. Timeframe: January 2020
- b) Add Extreme Situation Guide to required training in the Policy Manual. Timeframe: June 30, 2020
- c) Establish clinical protocol which implements a safety plan for members with history of domestic violence;
- d) Add safety education in the Member Guide
- e) Distribute the Purchasing Form and the Accountability Agreement Form developed by the Quality Council. These documents were previously developed and will be updated and distributed to providers.
- f) Add Personal Attendant boundaries to annual training requirements.

Goal 4. To incorporate Stakeholder input into the ADW program's Waiver Application and ADW policy. Objective 4.1. To develop the ADW Application and ADW Policy with consideration of Stakeholder input:

- a) Add input from the ADW forums into the Application and Policy Manual. Timeframe: December 2019
- b) Add input from the ADW Policy Committee, Quality Improvement Advisory Council. Timeframe: December 2019
- c) Post ADW 5-year Waiver Application, review comments and make revisions based on stakeholder input. Timeframe: July 2020
- d) Post the Draft ADW Policy Manual for public comment, review them and make appropriate changes based on stakeholder input. Timeframe: July 2020

Goal 5. To incorporate the Provider Plans of Correction into the provider processes to increase compliance and quality improvements. Objective 5.1. To connect Quality improvement efforts throughout the agency.

- a) Simplify the Plan of Correction method with outcomes and dates to ensure implementation and completion of the Plan. Conduct management training on the topic. Timeframe: June 2020
- b) Add the agency's Plan of Correction to the agency's Quality Management Plan. Example: Did the agency implement the Plan of Correction and what dates did it happen? Timeframe: June 2020

Goal 6. To increase health and welfare within the provider monitoring and certification process. Objective 6.1. Adapt WV's certification and monitoring processes to reflect increased scrutiny on health and welfare.

- a) Assess processes and add CMS recommended changes.

- b) Change the Waive Application and ADW policy to reflect the new process.

Currently working with CMS on these recommendations.

Goal 7. To ensure member complaints are heard and responded to at the provider level. Objective 7.1. Increase agency responsiveness to member complaints.

- a) Add Agency Complaint Policy to the Certification Requirements in the ADW manual. Timeframe: June 2020
- b) Add parameters around complaints in policy (goes to RN and CM, then Director, not support staff.) Timeframe: June 2020
- ADD c) Add IMS triage process to agency policies.

Goal 8. To ensure member healthcare is addressed. Objective 8.1. To increase prevention strategies in member healthcare.

- a) Continue to distribute Top 3 Prevention brochures. Timeframe: January 202
- b) Report to the Quality Council on Take Me Home WV Program's TeleHealth outcomes. Timeframe: July 2020
- c) Add to the CM Monthly Contact "Healthcare Coordination".

Goal 9. To monitor unexplained mortalities. Objective 9.1. To assess prevention of unexplained mortalities.

- a) Quality Council to review Unexplained Mortality review process. Timeframe: June 2020 (Also awaiting technical assistance from CMS on this Goal.)

ADD: Goal 10. This Goal and Objective will involve both the Online Case Management Pilot and No Wrong Door Initiatives created through The Money Follows the Person demonstration grant.

When the revised Draft Quality Work Plan is complete, it will again be presented to the Quality Council in January 2020 for approval.

- VIII. Stakeholder Input. None at this time.
- IX. Other Business. None at this time.

With no further business, John Raby motioned to adjourn, and Radene Hinkle seconded.

***Next Meeting: January 28, 2020***